

DALTON-IN-FURNESS URBAN SANITARY DISTRICT

ANNUAL REPORT

OF THE

Medical Officer of Health

For the Year 1950



DALTON-IN-FURNESS: J. SINKINSON & SON, PRINTERS, 1951 Digitized by the Internet Archive in 2017 with funding from Wellcome Library

Dalton-in-Furness Urban District Council.

Annual Report of the Medical Officer of Health for the Year 1950.

To the Chairman and Members of the Urban District Council of Dalton-in-Furness.

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to present to you the Annual Report of the Medical Officer of Health for the year 1950.

GENERAL STATISTICS.

Area (in acres) 8,022.

Population 10,560.

Number of inhabited houses 3,201

Rateable Value £,40,737.

Amount produced by a Penny Rate £156.983

VITAL STATISTICS

BIRTHS.—One hundred and fifty-five births, 77 male and 78 female occurred during the year, giving a birth-rate of 16.0 per 1,000 compared with a rate of 17.6 per 1,000 in 1949. Five of the births were of illegitimate children.

STILLBIRTHS.—Four children were stillborn during the year, giving a stillbirth rate of 25 per 1,000 total births.

DEATHS.—One hundred and forty-two deaths of residents, 71 male and 71 female, occurred during the year, giving a death-rate of 14.7 per 1,000 compared with a rate of 12.7 in 1949. The adjusted death-rate after correction for age and sex distribution is 13.1 per 1.000.

INFANTILE MORTALITY.—There were six deaths of infants under 1 year of age, giving an infantile mortality rate of 39 per 1,000. The sexes, ages and causes of death were:—

Female 3 months Congenital debility.

Male 2 months Congenital debility.

Female 1 day Prematurity

Female 6 months Tubercular meningitis.

Female 9 days Hydrocephalus.

Male 8 hours Prematurity.

DEATHS FROM DIARRHEA & ENTERITIS under 2 years of age-Nil.

MATERNAL MORTALITY.—Nil,

The table below shows the causes of death of Dalton residents in 1950.

	CAUSES OF DEATH				Male	FEMALE	TOTAL
1	Respiratory Tubercul	osis	***		3	_	3
2	Other Tuberculosis				1	l	2
3	Syphilitic Diseases						0
4	Diphtheria	**					0
5	Whooping Congh						0
6	Meningococcal infect	ion					0
7	Acute Poliomyelitis				_	Page 47	0
8	Measles	• • •	* * *			-	0
9	Other infective and p	arasitic d	isenses			-	0
10	Malignant neoplasm,	stomach			3	1	4
1 i	Malignant neoplasm,	lung and l	bronchus		1		1
12	Malignant neoplasm	breast				Salmanan	0
13	Malignant neoplasm,	uterus				3	3
14	Other in dignant and	lymphatic	neoplasm	S	8	3	11
15	Leukæmia and aleuk	æmia					0
16	Diabetes				-		0
17	Vascular lesions of ne	rvous sys	teni		8	16	24
18	Coronary disease, an	gina			12	8	20
19	Hypertension with he	art diseas	e		1	*****	1
20	Other heart disease				6	17	23
21	Other circulatory dise	ase	***		2	2	4
22	Influenza						0
23	Pnemnonia	• • •			2	3	5
24	Bronchitis				6		6
25	Other diseases of res	piratory sy	ystem				0
26	Ulcer of stomach and	,			1		1
27	Gastritis, enteritis an	d diarrhoe	·a .				0
28	Nephritis and nephro-	sis			3		3
29	Hyperplasia of prosta	cre			2		2
30	Pregnancy, childbirtl	rand abor	tion		<i>'</i> —		0
31	Congenital malforma				to	1	1
3.5	Other delined and ill-	defined di-	near-en		1.1	16	27
33	Motor vehicle accider						0
3+	All other accidents						0
35	Snicide				1		1
36	Homicide	***					0
					71	71	142

The principal causes of death of Dalton-in-Furness residents during 1950 were—Heart Disease 44; Cancer 19. There were five deaths from Tuberculosis.

CANCER.—Brief particulars of the 19 deaths from this disease are shown below:—

Site	Male	Female	Total
-Stomach	3	1	4
Uterus	_	3	3
Colon	2	1	3
Oesophagus	2		2
All other sites	_5	., 5	7
	1 2	7	19
	-		B0-000-00-0

The age distribution of deaths in 1950 is shown below:—

					-				_													
-	1	I-	5-1	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85-	90-	To)
Male	2	I		_	I	1			2	ó	3	3	7	10	14	9	7	3	3		7	I a
F'male	4	I	-	I		_			2	1	I	_	3	6	7	11	18	7	4	5	71	1
Total	6	2	_	I	I	1	_	_	4	6	4	3	10	16	21	20	25	10	7	5	142	2

69.1% of deaths were in persons of 65 years of age and over.

The table below shows comparisons between birth and death rates in England and Wales, 148 smaller towns and this district.

		n d and ales	148 Smalle 25-50,00			n-Furness District
Year	Births	Deaths	Births	Deaths	Births	Deaths
1946	19.1	11.5	21.3	11.7	17.6	14.3
1947	20.5	12,0	22.2	119	20.8	12.5
1948	17.9	10,8	19.2	10.7	17.5	12.7
1949	16.7	11.7	18.0	11.6	.7.6	12.7
1950	15.8	11.6	16.7	116	16.0	13.1

Note.—The death-rates for the Dalton-in-Furness Urban District quoted in the above table for the years 1946-1949 inclusive, are the crude death-rates. That quoted for 1950 is the adjusted death-rate after correction for age and sex distribution. This figure is more comparable with the rates quoted for England and Wales, and for 148 smaller towns.

The birth-rates quoted are adjusted birth-rates in all cases.

GENERAL PROVISION OF HEALTH SERVICES.

PERSONNEL. Medical Officer of Health (to 28th Feb. 1950): A Dodd, M.D., Ch.B. M.R.C.P., L.R.C.P., D.P.H.

MEDICAL OFFICER OF HEALTH (from 1st April, 1950): J. I. Wild, M.A., M.B., B.Chir. M.R.C.S., L.R.C.P., D.P.II.

- Other Appointments Held: Medical Officer of Health—Ulverston Rural District Council; Ulverston Urban District Council, and Grange-over-Sands Urban District Council.
- Sanitary Inspector:—W. W. Jackson, C.R.S.I., M.S.I.A. Meat & Foods Inspectors Certificate R.S.I. Certificate in Sanitary Science as applied to Buildings and Public Works.
 - Other Appointments Held: Cleansing Superintendent—Dalton-in-Furness Urban District. Housing Officer—Dalton-in-Furness Urban District.
- LABORATORY FACILITIES.—Bacteriological examinations are carried out at the laboratories of the Barrow and Furness Hospital Management Committe, assisted, if necessary, by the Public Health Laboratory, Liverpool.

Chemical Analyses, as required, are sent to the City Laboratories, Liverpool.

Maternity and Child Welfare, School Medical, Dental and Health Visiting Services.

Dalton -- Dowdales Clinic.

Monday a.m. Nil.

p.m. Immunisation, 1st Mon. each month, 2 p.m.

Luesday a.m. Minor Ailments Redressing Clinic.

p.m. Nil.

Wednesday a.m. Ophthalmic Clinic.

p.m. Antenatal Clinic.

Thursday a.m. Minor Ailments and Inspection Clinic.

p.m. Child Welfare Clinic.

Friday a.m. Dental Clinic.

p.m. Dental Clinic.

ULVERSTON-The Rookery, Brogden Street.

Monday a.m. Minor Ailments Redressing Clinic,
Dental Clinic.

p.m. Antenatal Clinic.
Dental Clinic.

Tuesday a.m. Orthopædic Clinic.

Dental Clinic.
Dental Clinic.

p.m. Dental Clinic.
Orthopædic Clinic (every 2 months).

Wednesday a.m Minor Ailments and Inspection Clinic.

p.m. Child Welfare Centre.

Thursday a.m Ophthalmic Clinic, Dental Clinic.

p m. Dental Clinic.

Friday a.m. Nil.

p.m. Nil.

Saturday a.m Immunisation Clinic, second Saturday each month, 10 to 11 a m.

Grange—Congregational Sunday School, Kents Bank Road Tuesday fortnightly, p.m., Child Welfare Centre.

Coniston—Church Rooms, Yewdale Road.

1st Friday each month, p.m., Child Welfare Centre.

Kirkby—Beckside School, 3rd Friday each month, p in , Child Welfare Centre.

HAWKSHEAD-Town Hall.

Last Wednesday, each mouth, p.m., Child Welfare Centre.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLIES.—The Urban District of Dalton-in-Furness is provided with water by the Barrow-in-Furness Corporation in mains belonging to the County Borough Council. Dalton is supplied from the Poaka Beck Reservoir and Askam from the Ulpha Intake of the River Duddon.

There was no shortage of water during the year 1950.

Three samples of water were examined bacteriologically during the year. All gave very satisfactory results.

This supply serves 3,167 dwelling-houses, representing approximately 10,442 persons, direct to the houses, and serves also 4 houses by means of stand-pipes representing another 13 persons. Thirty houses in the Urban District representing approximately 105 persons get a water supply from private sources.

Housing.—Although during the year thirty-seven houses were completed, there has been no alleviation of the housing shortage. There is also much old and sub-standard property in the district which will require attention under the Housing Acts as soon as conditions permit.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE.

The following table shows the numbers of cases of the notifiable infectious diseases which occurred in the Urban District during the five years 1945-1949, compared with the numbers in 1950:—

							1950	
DISEASE	1945	1946	1947	1948	1949	Number of Cases	Removedto Hospital	Deaths in Hospital
Scarlet Fever	1	1	7	37	46	28	26	_
Diphtheria		1	_		_	_		
Typhoid and Para-Typhoid	1 4				_		_	_
Measles	97		2	185	3	100		_
Whooping Cough	22	4	3	_	22	1		
Pneumonia		1	1	1	6			
Dysentery	24	_						_
Puerperal Fever	_		1					
Ervsipelas	1	1	2	2	2	5	1	
Cerebro-Spinal Fever	_	1	1	1	9			
Poliomyelitis	_	_	1		2			
Totals	146	9	18	226	82	134	27	

The incidence of infectious disease throughout the year has been low, with the exception of an outbreak of measles in the

Dalton area of the Urban District in March and April, and in the Askam district in November and December.

Tuberculosis. — The Tuberculosis service in the Dalton Urban District is administered by the Regional Hospital Board. The County Council and the Sanitary Authority are responsible for matters relating to care and after-care and prevention. A Tuberculosis Health Visitor is provided by the Lancashire County Council. The Dispensary at Ulverston is attended by the Consultant Tuberculosis Officer for the district and the Tuberculosis Health Visitor. Extensive facilities for the investigation and treatment of tuberculosis are available at High Carley Sanatorium, Nr. Ulverston.

The following table shows the number of new cases and mortality during 1950:—

	1	New	Cases		Deaths			
Age Periods Years	Respi M	iratory F		on- iratory F	Respi M	iratory F	on- ratory F	
0—	_			1			_	1
1—	_	_		_	_	_	_	_
2—	_	_	1	_	_		_	_
5		_		_	_			_
10—	_	_		_		_		_
15—		_	1	2		_	_	_
20—	2	1	_	_	1	_	_	_
25—	_	5	_	_		_		_
35—	_	_	_		_	_	_	_
45—	1	1	_	_	_	_		_
55 —		_		_	1	_	1	
65—	_	_	_	_	_	_	_	_
75 and upwards	_	_		_	1		_	_
TOTALS	3	7	2	3	3	0	1	1
	1	0		5		3	2	

The table below shows the numbers of new cases and deaths from tuberculosis in Dalton Residents during the past 12 years:—

		New	CASES			Di	RATHS	
	RESPIRA	ATORY N	ON RESPI	RATORY	RESPIRA	ATORY N	ON-RESPI	RATORY
Year	M	F	M	F	М	F	M	F
1939	9	7	7	7	4	5	_	2
1940	5	3	1	1	3	4		
1941	4	4	_	1	1	1	1	_
1942	5	4	4	4	1	4		_
1943	12	5	4	5	3	4		_
1944	4	4	4	1	5	2		_
1945	13	7	1	2	7	1	-	-
1946	4	7		2	2	8	1	
1947	9	8	4	3	2	1	1	
1948	7	10	3	2	1	5		
1949	10	4	1	4	2	0	2	0
1950	3	7	2	3	3		1	1

The number of new cases of tuberculosis notified fell slightly in 1950.

In conclusion, I thank the members of the Health Committee and officers of the Dalton-in-Furness Urban District Council, and, in particular, the Sanitary Inspector, for courtesy and help.

The report of the Sanitary Inspector is appended.

I have the honour to be,

Your obedient servant,

J. L. WILD,

Medical Officer of Health.

Report of the Sanitary Inspector, Cleansing Superintendent & Housing Officer.

To the Chairman and Members of the Dalton-in-Furness
Urban District Council.

Gentlemen,

I have pleasure to present to you my Annual Report on the work of the Health Department and Cleansing Services for the year ended 31st December, 1950. I also include in the report some notes on the housing position.

The ordinary routine work of the department proceeds much as usual, but progress is necessarily slow owing to the shortage of material and labour. It is quite evident that the scarcity of building labour is very serious. We are often confronted with a situation in which the owner cannot speedily comply with the department's notices due to this cause, in many cases instructions are given to a builder to carry out works required but owing to pressure of work the builder has on hand, some time elapses before he can get round to it.

I would again stress the considerable disproportion obtaining between the high cost of materials and labour and the average rent of houses in the area, and the fact that in the case of small property owners this very often results in cases of extreme hardship.

Housing Statistics.

2r :—	1. Inspection of Dwelling-houses during the yea	1.
	(1) (a) Total number of dwelling-houses in housing defects (under Public Health Acts)	
he purpose 185	(b) Number of inspections made for t	
onsolidated	(2) (a) Number of dwelling-houses which we ed and recorded under the Housing Control Regulations, 1925	
he purpose Nil	(b) Number of inspections made for t	
to be unfit	(3) Number of dwelling-houses found to be so dangerous or injurious to health as for human habitation	
lead) found	(4) Number of dwelling-houses (exclusive referred to under the preceding sub-house not to be in all respects reasonably fit habitation	
et accomiac of	2 Remedy of defects during the Year withou	9
ii service of	2 Remedy of defects during the Year without formal notices:—	_
	Number of defective dwelling-houses reacces of informal action by Authority or their Officers	
Year:—	3. Action under Statutory Powers during the	1.
d 16 of the	AProceedings under sections 9, 10 and Housing Act, 1936:	
ect of which served re Nil	(1) Number of dwelling-houses in respectively formal statutory notices were quiring repairs	
were rend- notices	(2) Number of dwelling-houses which ered fit after service of formal	
Nil	(a) By Owners	
lt of owners Nil	(b) By Local Authority in defau	
ts:	B.—Proceedings under Public Health Ac	
	(1) Number of dwelling houses in resp notices were served requiring re	

	(2)	Number of dwelling-houses which were rend ered fit after service of formal notices (a) By Owners	7
		(b) By Local Authority in default of owners	1
	No	or Sections 11 and 13 Housing Act, 1936 re Demolitions or Section 12 re Underground rooms.	
4.	Housin	g Act, 1936.—Part IV.—Overcrowding:—	
	(a) (i) Number of dwellings overcrowded at the end of the year	6
	(i	i). Number of families dwelling therein	13
	(ii	i) Number of persons dwelling therein	47
	(b) N	Number of new cases of overcrowding reported during the year	6
	(c) (i) Number of cases of overcrowding relieved	
		during the year	4
	(i	i) Number of persons concerned in	0-
		such cases	25

MILK SUPPLY.—The Council's activities are now restricted to supervision over the distribution of milk in our district, approximately 75% of the milk retailed is pasteurised and is sold in bottles.

Samples taken for bacteriological examination have all been satisfactory.

During the year it was only possible to take three samples for examination for T.B. by the inoculation test and all these proved to be negative. In the case of these latter samples I can only take these as the opportunity is offered by the laboratory and an acute shortage of facilities for this test caused a great restriction in the number available.

FOOD AND DRUGS ACT.—One hundred and forty-three visits were made to various food premises in the district for the purpose of inspection under Section 13 of the Food and Drugs Act, and the examination of foodstuffs In four cases attention was drawn to matters requiring attention which were subsequently dealt with

UNFIT FOOD.

9	Can	s of	Soup	2	tins cocoa mixture
76	,,	of	vegetables mix	xed 6	jars salad cream
12	,,	of	meat	72	meat pies
16	,,	of	preserves	42	lb. of Bacon
12	,,	of	Tomatoes	25	packets of Cheese
31	,,,	of	fruit	2	jars Pickles
100	22	10	evaporated mi	ilk 4	packets of suet
5	,,	of	fish	14	lbs. of sugar
61	lbs	of S	ausage	3	lbs. of Flour
152	lbs.	of t	peef	10	lbs. of parkin
31	jam	roll	S	6	packets of cereal

OFFENSIVE TRADES.—There are seven Fried Fish Shops and one Knacker's Yard.

We have had only one complaint regarding the knackery at Marton, this building is now vastly improved and will bear favourable comparison with similar businesses in other areas.

ICE CREAM.—Regular visits were paid to the three premises manufacturing ice cream and samples were taken none of which showed any serious defect.

I am pleased to report that the largest of these manufacturers has made a determined effort to obtain up-to-date equipment and to use modern methods.

REFUSE COLLECTION.—This service continues to be carried out without serious complaint.

The position regarding the supply of dustbins appears to be improved, though much remains to be done before the position is satisfactory.

I feel I must comment on the fact that refuse is disposed of at Elliscales tip by means of crude tipping as has been the case for many years. This is a most undesirable practice and the only thing that can be said in favour of the Elliscales tip is its isolated position.

The number of Privies, Pail closets and dry Ashpits remains the same; twenty nine, six and sixty-four respectively these being at outlying premises.

During the year 58 tons of paper valued at £320 and Rags to the value of £3 were disposed of.

The corresponding amounts for the year 1949 were 55 tons of paper valued at $\pm .351$ and rags to the value of $\pm .4$.

Housing.—During the year thirty-six houses on the Anty-Cross site were completed and occupied, in spite of this the number of families on the housing list does not decrease, in fact the circumstances of those who really need houses continues to grow daily more serious.

I would again stress that probably 40-45% of the applicants on our housing list are not particularly in need of accommodation although they obviously want better accommodation than they have at present.

Whilst I appreciate the financial side of the Council's housing activities and agree that this is a very serious matter, I cannot too strongly point out that the happiness and well-being of a large section of the community far outweight financial considerations.

I would suggest the Council consider the advisability of building a number of bungalows for older people. These can be built cheaper and speedier per unit, and more units from a given quantity of material than three-bedroomed houses, whether or no the houses vacated by old people are let from the housing list or dealt with privately it still remains a family house, the nett result being that the total accommodation is increased at less expense to the Council.

In conclusion I am happy to record the good feelings existing between various trades of the town and the Health Department in its activities. My thanks are due to the Health Committee, the Medical Officer and other officers of the Council for their unstinted co-operation and to Miss Atkinson and the cleansing staff without whose assistance the work of the Department cannot successfully go on

I am, Gentlemen,

Your obedient servant.

W. W. JACKSON,
Sanitary Inspector.





